

REMARKS

Claims 1-7 and 12-20 are pending in this application. Claim 12 has been amended to further clarify the present invention. Applicant respectfully submits that no new matter has been added by the amendments. Support for the amendments can be found throughout the specification and pre-existing claims. Claim 13 has been cancelled.

Rejection of Claims 1-7 and 12-20 under 35 U.S.C. 103(a)

Claims 1-7 and 12-20 are rejected under 35 U.S.C. 103(a) as being unpatentable over Myers et al. ("Myers 450" U.S. Patent No. 5,832,450) and Myers ("Myers 903" U.S. 2003/0083903). These claims are deemed to be patentable for the reasons given below.

The present claimed invention describes a network compatible user interface system and method supporting navigation through patient medical information. The system includes a communication processor for acquiring a patient group identifier allocated to a grouping of patients and for acquiring medical information associated with the patients. A display generator generates a composite display window incorporating a first window including the patient group identifier and a list of patients in the grouping; and a second window for displaying different medical information corresponding to different medical applications, the different medical information being associated with patients in the grouping of patients. A display navigation processor maintains the first window display while displaying different medical information in the second window in response to user navigation between the different applications. Similar limitations to those discussed above are included in independent claims 1, 12 and 17. These features are neither shown nor suggested in Myers 450 and Myers 903.

Myers 450 describes an electronic medical record system. The system stores data regarding patient encounters arising from a content generator in freeform text. A header for each encounter record also uses text to store context information for each encounter

record. However, as admitted in the Office Action, Myers 450 neither discloses nor suggests “a communication processor for acquiring a patient group identifier allocated to a grouping of patients and for acquiring medical information associated with said patients” as recited in the present claimed invention. Rather, column 4, lines 38-48 of Myers 450 describe “**each** patient is listed by name and a **unique patient identification code** (the medical record number or “MRN”). The Main window 28 displays medical record data for the selected patient.” Applicant respectfully submits there is no 35 USC 112 enabling disclosure in Myers 450 of “a patient group identifier allocated to a grouping of patients” as recited in the present invention. Myers 450 merely describes a “unique patient identification code” for each patient. The present claimed invention, on the other hand, acquires “a patient group identifier” for determining the patients located in particular care units at a particular time.

Applicant also respectfully submits that Myers 450 neither discloses nor suggests “a display generator for generating a composite display window incorporating a first window including said patient group identifier and a list of patients in said grouping” as admitted in the Office Action. Column 4, lines 34-40 of Myers 450 describe a display of “a list of patients to be seen by the provider for that day.” As argued above, there is no mention or even suggestion of a “patient group identifier” in Myers 450 and thus Myers 450 neither discloses nor suggests “a display generator for generating a composite display window incorporating a first window including said patient group identifier and a list of patients in said grouping” as recited in the present claimed invention.

In addition, contrary to the assertion on page 2 of the Office Action, Applicant respectfully submits Myers 450 neither discloses nor suggests “a second window for displaying different medical information corresponding to different medical applications, said different medical information being associated with patients in said grouping of patients” as in the present claimed invention. Column 4, lines 49-53 of Myers 450 (cited by the Office Action) describes displaying “medical record data for the selected patient...the medical record shown in the Main window 28 depends upon the encounter

type selected” and then further details the 7 different encounter types. This passage neither discloses nor suggests “a second window for displaying different medical information corresponding to different medical applications, said different medical information being associated with patients in said grouping of patients” as recited in the present claimed invention.

Furthermore, Applicant respectfully disagrees with the assertion on page 2 of the Rejection that Myers 450 teaches “a display navigation processor for maintaining said first window display while displaying different medical information in said second window in response to user navigation between said different applications” as recited in the present claimed invention. Column 4, lines 41-48 of Myers 450, as stated above, recites “A patient may be selected from the Available Documents window 26 by double-clicking on the desired patient’s name. The medical record shown in the Main window 28 depends upon the encounter type selected. The encounter type may be selected using an encounter type button 29a from the Folder window 30 or using an encounter type button 29b from the list of encounter types on the right side of the Main window 28.” This is unlike the navigation between applications in the second window while the display in the first window is maintained as in the present invention.

The system of Myers 450 allows the user to select a patient from a list of patients and to select the type of encounter (Figure 2a). After the user has selected a patient and encounter, the patient’s encounter information is provided as are “a list of the patient’s encounter records for the selected encounter type...by default, the most recent document for the selected encounter type is displayed in the Main window 28.” The remaining documents for the selected encounter type “can be displayed by clicking on the desired document title in the Available documents window 26” (column 5, lines 3-9, Figure 2b). In Myers 450, once a patient and encounter type is selected from the list of patients, the list of patients is replaced by the documents in the selected encounter for the selected patient. The user is unable to view the encounter information for a particular patient at the same time as the list of patients. This is unlike the present claimed invention where the list of

patients remains “pinned” within the first window even after a particular patient is selected and the data associated with the selected patient are displayed in the second window.

“Subsequent selection of a different patient 3153 within the given care unit causes that newly selected patient’s data to be retrieved and loaded within the currently selected application tab. This advantageously enables ‘electronic rounds’ within an application with minimal user interaction” (Specification page 13, line 25-page 14, line 10). Thus, Myers 450 neither discloses nor suggests “a display navigation processor for maintaining said first window display while displaying different medical information in said second window in response to user navigation between said different applications” as recited in the present claimed invention.

Myers 903 describes a system for generating a billing report for rendered services that includes both local and remote processing devices. The method and system generate billing and report information substantially contemporaneously with services rendered by a service provider.

The assertions made on page 3 of the rejection regarding claim 1 actually use language pertaining instead to claim 12, which will be discussed hereinafter with respect to claim 12. Notwithstanding, contrary to the assertion made in the Rejection, Myers 903, similarly to Myers 450, neither discloses nor suggests “a display navigation processor for maintaining said first window display while displaying different medical information in said second window in response to user navigation between said different applications” wherein the first window includes “patient group identifier and a list of patients in said grouping” and the second window displays “different medical information corresponding to different medical applications, said different medical information being associated with patients in said grouping of patients” as recited in the present claimed invention. Rather, Figure 3C of Myers 903 enables a user to display any information identified in the encounter. Figure 3D, and accompanying language in paragraph [0118] of Myers 903 shows “the service provider has chosen to request all currently scheduled encounters via a list menu 310, and selecting an individual encounter.” Myers 903 is concerned with

“generating an insurance claim form or other billing report and/or a medical procedure report that results in accurate report generation the first time...a mechanism for accurately and expediently verifying compliance with third party reporting requirements prior to submission of the billing report for payment to the third party...[and to] prevent inconsistencies between entries made in a medical procedure report documenting services rendered and a billing report seeking payment for those same services” (page 2, paragraph [0010]). Thus, Myers 903 is concerned with a completely different problem than the present claimed invention and has no reason to provide a display navigation processor for maintaining said first window display while displaying different medical information in said second window in response to user navigation between said different applications” wherein the first window includes the “patient group identifier and a list of patients in said grouping” and the second window displays “different medical information corresponding to different medical applications, said different medical information being associated with patients in said grouping of patients” as in the present claimed invention.

It is also further respectfully submitted that there is no reason or motivation to combine Myers 450 with Myers 903. Myers 450 is concerned with a text based system that is able to “reconcile provider’s desires for maintaining a format of unstructured medical information with database requirements for highly structured data storage”. Myers 903 describes a method and system for generating billing information that is essentially simultaneous with services rendered by a service provider. Myers 450 and Myers 903 relate to different aspects of the health care system and thus it is respectfully submitted that the combination of these references to produce the present claimed invention would not be obvious. Myers 450 deals with the medical component of the health care system and gathering information from numerous different provider-patient encounters. Myers 903, on the other hand, deals with accurate reporting of insurance claim forms and medical procedure reports. Myers 450 and Myers 903 are concerned with totally different fields (medical data and billing data) and have totally different objectives and thus it is respectfully submitted that the combination of these references is not proper.

However, even if there was reason or motivation to combine these two references, the combination of the system of Myers 450 with the system of Myers 903 as suggested in the Rejection would not result in the present claimed invention. This combination would result in maintaining a format of unstructured billing reports with database requirements for highly structured data storage. The combination of Myers 405 and Myers 903 neither disclose nor suggest “a communication processor for acquiring a patient group identifier allocated to a grouping of patients and for acquiring medical information associated with said patients” as in the present claimed invention. Additionally, this combination neither discloses or suggests “a display generator for generating a composite display window incorporating a first window including said patient group identifier and a list of patients in said grouping; and a second window for displaying different medical information corresponding to different medical applications, said different medical information being associated with patients in said grouping of patients” as in the present claimed invention. Furthermore, this combination neither discloses nor suggests “a display navigation processor for maintaining said first window display while displaying different medical information in said second window in response to user navigation between said different applications” as in the present claimed invention.

Additionally, Applicant respectfully submits that Myers 450 neither discloses nor suggests “said patient group identifier in said first window is user-selectable” as in claim 5 of the present invention. Column 4, line 42 of Myers 450 describes that “A patient may be selected from the Available Documents window.” As described above, Myers 450 nowhere discloses or suggest a “patient group identifier.” Thus, Myers 450 cannot disclose or suggest “said patient group identifier in said first window is user-selectable” as in the present claimed invention.

Also contrary to the assertion in the Office Action, Applicant respectfully submits that Myers 450 neither discloses nor suggests “said patient group identifier is maintained in memory after user logout of the system” as in claim 7 of the present invention. As described above, Myers 450 nowhere discloses or suggests a “patient group identifier.”

Thus, Myers 450 neither discloses nor suggests “said patient group identifier is maintained in memory after user logout of the system” as in the present claimed invention.

The present claimed invention as recited in amended claim 12 describes a network compatible user interface system supporting navigation through patient medical information. The system includes a communication processor for acquiring patient medical information for storage in a database. A menu generator generates a menu displaying a list of fields prompting user entry and selection of at least one field to be searched. Each field identifies a group of patients and is associated by a respective group identifier. A search engine searches the database of acquired medical information to identify patients associated with the group identifier indicated by search criteria determined by user selection of the field and entry of a text string. A display processor displays a first window including the identified patients, and automatically displays in a second window different medical information for the patients identified to be associated with the group identified by the selected field in response to user navigation between different applications. The display processor automatically displays different medical information for the identified patients for the different applications in the second window without user re-entry of information determining the identified patients in the first window. These features are neither shown nor suggested in Myers 405 with Myers 903.

Myers 450 (with Myers 903) neither disclose nor suggest “a menu generator for generating a menu prompting user entry and selection of at least one field to be searched, each field identifying a group of patients and indicated by a unique group identifier” as in the present claimed invention. Contrary to the assertions made in the Rejection, selection of a patient on “available record” 26 in Figure 2a of Meyers 450 merely displays a list of available patient records to be **selected**. There is no “prompting **user entry** and selection of at least one field **to be searched**.” Myers 450 is not concerned with prompting a user to enter and select a field identifying a group of patients as in the present invention. Meyers 450 is not concerned with the tracking of medical patients through multiple care units and the obtaining of data associated with those patients as they navigate through the multiple

care units as in the present invention. Meyers 450 is concerned with indexing, storing and retrieving medical records obtained from numerous different sources and combining unstructured medical information with highly structured data storage. Meyers 450 therefore neither disclose nor suggest “generating a menu prompting user entry and selection of at least one field to be searched, each field identifying a group of patients and indicated by a unique group identifier” as in the present claimed invention.

In addition, contrary to the assertion made in the Office Action, Column 4, lines 34-40; Column 5, lines 3-5 and Figures 2a and 2b of Myers 450 neither disclose nor suggest “a search engine for searching said database of acquired medical information to identify patients associated with the group identifier indicated by search criteria determined by user selection of said field **and** entry of a text string” as claimed in claim 12 of the present invention. Rather Col. 4, lines 34-40 of Myers 450 describes that different information is displayed in the available documents window depending on the mode of the interface. The Available Documents window in Figure 2a displays a list of patients. Column 5, lines 3-5 describes that when a patient is selected, the available documents window displays available patient encounter records for a selected patient, as shown in Figure 2b. These passages contain absolutely no suggestion of “search criteria determined by user selection of said field **and** entry of a text string” as recited in claim 12 of the present invention. Further, Myers 903 in Figure 3C permits user to select a field and enter a date a range. However, Myers 903 is able to perform the search exclusively through selection of the field, without user entry of a text string. The present claimed invention, on the other hand, identifies patients “by search criteria determined by user selection of said field **and** entry of a text string.”

Myers 903 (with Myers 450) also neither discloses nor suggests “a display processor for displaying a first window including said identified patients and automatically displaying in a second window different medical information for said patients identified to be associated with the group identified by the selected field in response to user navigation between different applications; and wherein said display processor automatically displays

different medical information for said identified patients for different applications in said second window without user re-entry of information determining said identified patients in said first window” as recited in claim 12 of the present invention. As discussed above, Figure 3C of Myers 903 enables a user to display any information identified in the encounter. Figure 3D, and accompanying language in paragraph [0118] of Myers 903 shows “the service provider has chosen to request all currently scheduled encounters via a list menu 310, and selecting an individual encounter.” Nowhere in Myers 903 (with Myers 450) is it even suggested that the “display processor automatically displays different medial information for said identified patients for different applications in said **second window** without user re-entry of information determining said identified patients in said **first window**” as in the present invention. In other words, the present invention maintains the list of identified patients in the first window while the second window “displays different medical information for the identified patients”.

As described above, Myers 903 is concerned with “generating an insurance claim form or other billing report and/or a medical procedure report that results in accurate report generation the first time...a mechanism for accurately and expediently verifying compliance with third party reporting requirements prior to submission of the billing report for payment to the third party...[and to] prevent inconsistencies between entries made in a medical procedure report documenting services rendered and a billing report seeking payment for those same services” (page 2, paragraph [0010]). Thus, Myers 903 is concerned with a completely different problem than the present claimed invention and has no reason to provide “a display processor for displaying a first window including said identified patients and automatically displaying in a second window different medical information for said patients identified to be associated with the group identified by the selected field in response to user navigation between different applications; and wherein said display processor automatically displays different medical information for said identified patients for different applications in said second window without user re-entry of information determining said identified patients in said first window” as in the present claimed invention.

In view of the above remarks, it is respectfully submitted that there is no 35 USC 112 enabling disclosure in either Myers 450 or Myers 903, when taken alone or in combination, that makes the present claimed invention unpatentable. As independent claims 1 and 17 each include limitations similar to those discussed above, all arguments presented above are applicable to each of these claims. Thus, in view of the above remarks, it is respectfully submitted that claims 1 and 17 are patentable over Myers 450 and Myers 903. As claims 2-7 and 18-20 are dependent on claims 1 and 17 respectively, it is also respectfully submitted that these claims are also patentable over Myers 450 and Myers 903. Additionally, in view of the above remarks, it is respectfully submitted that claim 12 is patentable over Myers 450 and Myers 903. As claims 13-16 are dependent on claim 12, it is respectfully submitted as claims 13-16 are also patentable over Myers 450 and Myers 903. Consequently, withdrawal of the Rejection of Claims 1-7 and 12-20 under 35 USC 103(a) is respectfully requested.

Having fully addressed the Examiner's rejections, it is believed that, in view of the preceding amendments and remarks, this application stands in condition for allowance. Accordingly then, reconsideration and allowance are respectfully solicited. If, however, the Examiner is of the opinion that such action cannot be taken, the Examiner is invited to contact the applicant's attorney at the phone number below, so that a mutually convenient date and time for a telephonic interview may be scheduled.

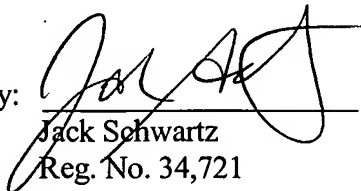
Application No. 10/008,125

Attorney Docket No. 00P9139US01

No additional fee is believed due. However, if an additional fee is due, please charge the additional fee to Deposit Account 50-2828.

Respectfully submitted,
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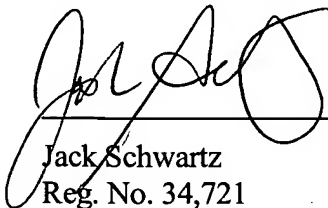
Application No. 10/008,125

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